

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/910987	
	Filing Date	07/23/2001	
	First Named Inventor	Yihsiu Chen et al.	
	Group Art Unit	2151	
	Examiner Name	Not Yet Assigned	
Total Number of Pages in this Submission	2	Attorney Docket Number	2000-0183

RECEIVED
SEP 19 2002
Technology Center 2100

Enclosures (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Drawing(s) & Letter to Official Draftsman <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to the Commissioner <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> CD, Number of CDs <input checked="" type="checkbox"/> Additional enclosure(s) (please identify below) <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Request to Rescind Nonpublication Request 35 U.S.C. 122(b)(2)(B)(ii) </div>
Remarks		

CORRESPONDENCE ADDRESS		
<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<div style="border: 1px solid black; padding: 5px; text-align: center;"> Customer Number - 26652 </div>	or <input type="checkbox"/> Correspondence address below

NAME	Samuel H. Dworesky		
ADDRESS	AT&T CORP. P.O. Box 4110		
CITY	Middletown	STATE	New Jersey
COUNTRY	United States of America	ZIP CODE	07748-4110
		FAX	732-368-6932

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	Michele L. Conover	Reg. #	34962
TELEPHONE	908-221-5773		
SIGNATURE	Michele L. Conover	DATE	9/10/02

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date:			
Type or Printed Name	Lisa Heubach		
Signature	Lisa Heubach	Date	9/10/02

SEND TO: Commissioner for Patents, Washington, D.C. 20231



**REQUEST TO RESCIND
NONPUBLICATION
REQUEST
35 U.S.C. 122(b)(2)(B)(ii)**

Application Number	09/910987
Filing Date	07/23/2001
First Named Inventor	Thomas Joseph Killian et al.
Title	System For Automated Connection To Virtual Private Networks
Atty. Docket Number	2000-0183
Group Art Unit	2151
Examiner	Not Yet Assigned

I hereby **rescind** the previous request that the above-identified application not be published under 35 U. S. C. 122(b).

RECEIVED

SEP 19 2002

Technology Center 2100

9/10/02
Date

Michele L. Conover
Signature

Michele L. Conover
Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b).